Best Available Copy—

								Application or Docket Number					
	PATENT A	. 4	ł	963	33	91	1212						
Effective January 1, 2003 6 1 2300-1062													
		CLAIMS AS	S FILED - PART I (Column 1) (Column 2)				SMALL ENTITY			ΉΤΥ	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			74				RATE			FÉE]	RATE	FEE
FOR			NUMBER FILED NUMBI			ER EXTRA	BASIC FI		FEÉ	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			74 minus 20= *54				X\$ 9		; . }=		OR	X\$18=	
INDEPENDENT CLAIMS			9 minus 3 = 6					X42	:: =		OF	X84=	
MULTIPLE DEPENDENT CLAIM P			RESENT				+140=		3				,
* If	the difference	in column 1 is	less than ze	ess than zero, enter "0" in col				TOT/			OR	: +280∌ TOTAL	
X ·	(·								\ L	,	OR	. 177 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984	
1-1	CLAIMS AS AMENDED - PART II								LL E	ENTITY	OR	OTHER SMALL	
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIG NUI PREV		HEST IBER OUSLY FOR	PRESENT EXTRA		RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MOZ	Total	. 74	Minus	7L	1.	=		X\$ 9	# : = :		OR	X\$18=	
AME	Independent	* C	Minus	••• G		= 1		X42	=		OR	X84=	
匚	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM.						1						· · · ·
	·					7	+140	:		OR	+280=		
							·. :	TO ADDIT, F			OR	TOTAL ADDIT. FEE	
 		(Column 1)	(Column 3)	ú .	<u> </u>	· ·		•	<u></u>				
ENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM	OUSLY	PRESENT :		PATI	E.	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MENDMENT	Total	•	Minus	**		,, =		X\$ 9	 ≓		OR	X\$18=	
AME	Independent	• .	Minus	***		=		X42			ÖΡ	X84=	Y-
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									e version		200 B	
ľ	•		-		•	-		+140	٠		OR	∓280 =	
. .		•	. *.				,	TO: ADDIT. F	AL EE		OR:	TOTAL	3.4
(Column 1) (Column 2) (Column 3)													
ENTC		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER OUSLY	PRESENT /		RAT	ź.	ADDI TIQNAL		FATE	ADDI- TIONAL

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

Minus

Minus

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Total

Independent

ØЯ

OR

OR

+140=

TOTAL ADDIT. FEE X\$18=

X84=

+280=

TOTAL ADDIT. FEE